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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Shinji Kaneko
Serial No: 10/658,475
Filed: September 9, 2003
For: VARIABLE GEOMETRY
MIRROR HAVING HIGH-
PRECISION, HIGH GEOMETRY
CONTROLLABILITY
Examiner: Mohammad Y. Sikder
Art Unit: 2872
Docket: 15807A
Dated: January 12, 2005
Conf. No.: 2038

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE

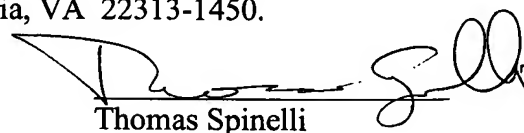
Sir:



In response to the Official Action dated November 8, 2004, Applicant respectfully requests reconsideration of the above-identified application in light of the following amendments and remarks:

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: January 12, 2005


Thomas Spinelli

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 15807A	
Applicant(s): Shinji Kaneko						
Application No. 10/658,475	Filing Date September 9, 2003	Examiner Mohammad Y. Sikder	Customer No. 23389	Group Art Unit 2872	Confirmation No. 2038	
Invention: VARIABLE GEOMETRY MIRROR HAVING HIGH-PRECISION, HIGH GEOMETRY CONTROLLABILITY						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	13 -	20 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	1 -	3 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-1013/SSMP <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Signature			Dated: January 12, 2005			
Thomas Spinelli Registration No.: 39,533			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on <div style="text-align: center;"> 1/12/05 (Date) </div> <div style="text-align: center;">  Signature of Person Mailing Correspondence </div> <div style="text-align: center;"> Thomas Spinelli Typed or Printed Name of Person Mailing Correspondence </div>			
cc:						